15-0728, 15-0600-536 CITY OF LOS ANGELES SPEAKER CARD (14-0268-54) 14-0268-55

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EXCEPT TO THE	EXTENT NECESSARY FOR TH	E PRESIDING OFFICER TO	O CALL UPON	YOU
Date 4 20 16	THE CITY COUNCIL'S DECORUM WILL BE E		ouncil File No., A	genda Item, or Case No.
	lame of City Agency, Departn	nent, Committee or Coun	cil	
Do you wish to provide general publ		or against a proposal on t	he agenda?) For proposal
Name: WALTON	SENTERFUTT			Against proposal General comments
Business or Organization Affiliation:	L.A. Tenant	5 Union		
Address: 2427 Modn			CA State	9003 Zip
Business phone:				
CHECK HERE IF YOU ARE A PA	AID SPEAKER AND PROV	DE CLIENT INFORMAT	ION BELOW	<i>t</i> :
Client Name:			Pho	one #:
Client Address:				
Street	City		State	Zip

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Date 4/20/16	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	lo., Agenda Item, or Case No.	
I wish to speak before the/	Name of City Agency, Department, Commi	Meeting thee or Council	
Do you wish to provide general p Name: <u>Shela</u> Dh	ublic comment, or to speak for or against a p	proposal on the agend	a? () For proposal () Against proposal () General comments
Business or Organization Affiliation			
Address: 2700 Ell	endale P1, #306 1	-A CA	96607
Business phone: 213-373		State	Zip
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT	INFORMATION BEL	.ow:
Client Name:			Phone #:
Client Address:	City	State	Zin

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Date 4/20/2016	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File N	o., Agenda Item, or Case No.
I WISH to speak before the	Name of City Agency, Department, Comm	ittee or Council	
Name: Andro	oublic comment, or to speak for or against a		a? () For proposal Against proposal General comments
Business or Organization Affiliation		A .	
Address: 13341 Street	N. Formosa Au	LH CA	9004-6 Zip
Rusiness phone:	Representing:		
	PAID SPEAKER AND PROVIDE CLIENT	INFORMATION BEL	.ow:
Client Name:			Phone #:
Client Address:	City	State	Zip
Sueel	City	State	ZID

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Date		Council File No. Acondo Itam or Coco No	
Date	THE CITY COUNCIL'S RULES OF	Council File No., Agenda Item, or Case No). 1 1
	DECORUM WILL BE ENFORCED.	I fem # 2 - Spolenen	pl
I wish to speak before the	A House / Commany Investment, Committee on	end or Council	<u>e</u>
Do you wish to provide genera	al public comment, or to speak for or against a propos	sal on the agenda? () For proposal () Against proposal	
Name: Vzette	E Show	() General commer	
Business or Organization Affilia	ation: S/41 Bow from A Women	is Perspetive / Rank	ev
Address: 72 (2	6 6th St #317 LA, U	A 90021	
	Representing:		
CHECK HERE IF YOU ARE	A PAID SPEAKER AND PROVIDE CLIENT INFO	ORMATION BELOW:	
Client Name:		Phone #:	
Client Address:	City	Stata 7in	

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Pate 4/20/20/6	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda	a Item, or Case No.
I wish to speak before the			
	Name of City Agency, Department, Committee of	or Council	
Name: EDDIE G Business or Organization Affiliation	NONE / RETIRED (88	() (Against proposal General comments
Address: HDMELESS Street	5 City	State Z	ip
Business phone: None	Representing:		
CHECK HERE IF YOU ARE A F	PAID SPEAKER AND PROVIDE CLIENT INF	ORMATION BELOW:	
Client Name:		Phone #	V
Client Address:Street	City	State Z	ip

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Date 4-20-	1/2	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No.,	Agenda Item, or Case No.
I wish to speak before	the H	of City Agency, Department, Committee	or Council	
Do you wish to provide	e general public co	mment, or to speak for or against a prop		() For proposal
Name:	Anto	onia Larunz		Against proposal General comments
Business or Organizat	ion Affiliation:			
Address:				
S	treet	City	State	Zip
Business phone:		Representing:		
CHECK HERE IF YO	OU ARE A PAID S	SPEAKER AND PROVIDE CLIENT IN	FORMATION BELOV	w:
Client Name:			Ph	one #:
Client Address:	treet	City	State	Zip

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Date 1-20 16	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.	
I wish to speak before the	Name of City Agency, Department, Committee	or Council	
Name: A McCou	ublic comment, or to speak for or against a propo	osal on the agenda? (X For proposal () Against proposal () General comments	
Address: 1850 Cha	ecke Mr City		
Business phone: 323-7(39.95 Representing: Vetc		
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT INF	ORMATION BELOW:	
Client Name:		Phone #:	
Client Address:Street	City	State Zip	

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4.21. 6	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.
I wish to speak before the	Name of City Agency, Department, Committee	pe or Council
Do you wish to provide general p	public comment, or to speak for or against a pro	oposal on the agenda? () For proposal
Name:	BYNE From ENEINO	() Against proposal () General comments
Business or Organization Affiliation	on:	0.
Address:Street	+ Herb= Po	Vertsiate Zip
Business phone:	Representing:	
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT I	NFORMATION BELOW:
Client Name:	touse negro	Phone #:
Client Address:	C/kt/o	State Zip

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Date 4/20/16	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.	Council File No., Agenda Item, or Case No.	0.
I wish to speak before the	Name of City Agency, Department, Committee	E Supp ACOUND	M
Do you wish to provide general p	public comment, or to speak for or against a prop	posal on the agenda? () For proposal	
Name: MAWA		() Against proposal () General commer	l nts
Business or Organization Affiliati	on:		
Address: 3641	BBETHOUGH SI	CA 90066	
Business phone: 310 56	252 Representing:	State Zip	
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIENT IN	FORMATION BELOW:	
Client Name:		Phone #:	
Client Address:	City	State Zip	

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Date 04/20/2016		COUNCIL'S RULES OF WILL BE ENFORCED.	Council File	No., Agenda Item, or Case No.
I wish to speak before the	Hasing Name of City Ager	cy, Department, Committee or	Council	
Do you wish to provide general Name: Salding		speak for or against a proposa	l on the agend	da? () For proposal () Against proposal () General comments
Business or Organization Affiliati	ion: ACA, L	AT.A.Y , U.T.A.		
Address: 6770 Yuc	ca St. #A	Los Angeles	CA	90078
Business or Organization Affiliation Address: 6770 Your Street Business phone: 323-637-	8052 Represe	nting: Yuca - Argyle	Tenan	to Association
CHECK HERE IF YOU ARE A	A PAID SPEAKER	AND PROVIDE CLIENT INFOR	RMATION BE	LOW:
Client Name:				Phone #:
Client Address:Street		City	State	Zip

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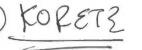
Date 4/20/16	Council File No., Agenda Item, or Case No		
I wish to speak before the	Housing Cormittee Name of City Agency, Department, Committee	or Council	
Do you wish to provide general pu	ublic comment, or to speak for or against a prope	osal on the agend	a? (For proposal
Name: Andrew Dou	ac las		() Against proposal() General comments
Business or Organization Affiliation	n: Resident		
Address: 308 E 9Hb	St Los Angeles	CA	90015 Zip
Business phone:	9		
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIENT INF	FORMATION BEL	.ow:
Client Name:			Phone #:
Client Address:			
Street	City	State	Zip

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4/20/14			CITY COUNCIL'S RULES OF RUM WILL BE ENFORCED.	Council File N	No., Agenda Item, or Case No.
I wish to speak befor	e the		Agency, Department, Committee	or Council	
Do you wish to provi	de genera	I public commen	t, or to speak for or against a prop	osal on the agend	la? (√) For proposal
Name:					() Against proposal () General comments
Business or Organiz	ation Affilia	ation:			
Address: Po	Box Street	195	Los Angeles City	C/A State	90078 Zip
4			presenting:		
CHECK HERE IF Y	OU ARE	A PAID SPEAK	CER AND PROVIDE CLIENT IN	FORMATION BEL	LOW:
Client Name:					Phone #:
Client Address:	Street		City	State	Zip

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Date 20 APR 16	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED	7	No., Agenda Item, or Case No.
I wish to speak before theH2	Name of City Agency, Department, Com		
Do you wish to provide general p	public comment, or to speak for or against a	a proposal on the agend	da? () For proposal Against proposal () General comments
Business or Organization Affiliati	on: AAGLA		
Address: ZZC3 5, f	TARVARD BLA CA	∠ Å State	90015-2143 Zip
Business phone: 323.732	953 C Representing:		
CHECK HERE IF YOU ARE A	PAID SPEAKER AND PROVIDE CLIEN	IT INFORMATION BE	LOW:
Client Name:			Phone #:
Client Address:Street	City	State	Zip



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Date 4/20/16	THE CITY COUNCIL'S RULES OF DECORUM WILL BE ENFORCED.		, Agenda Item, or Case No.
I wish to speak before the	Housing Committee Name of City Agency, Department, Committee or	Council	
Name: Jim Bic	public comment, or to speak for or against a propos		() Against proposal () General comments
Business or Organization Affiliati	ion: Office of Councilment	ber Kore	12
Address: 200 N	Spring St. LA 900	0/2 State	Zip
Business phone: 213473-	7005 Representing: Councilmentes	- Koretz	
CHECK HERE IF YOU ARE A	A PAID SPEAKER AND PROVIDE CLIENT INFO	RMATION BELO	ow:
Client Name:		P	hone #:
Client Address:			
Street	City	State	Zip